CLAIMS AS FILED - F			Effective October 1, 2000 09/77 9, 954				
(Column 1	•	SMALL ENTITY TYPE		HER THAN ALL ENTITY			
TOTAL CLAIMS 19		RATE FEE	RA	TE FEE			
FOR NUMBER FI	LED NUMBER EXTRA	BASIC FEE 355.00	OR BASIC	FEE 710.00			
TOTAL CHARGEABLE CLAIMS G minu	us 20= *	X\$ 9=	OR X\$1	8=			
INDEPENDENT CLAIMS 4 min	us 3 = }	X40=	V2				
MULTIPLE DEPENDENT CLAIM PRESENT		X40-	Un				
		+135=	OR +27				
* If the difference in column 1 is less than zero, enter "0" in column 2		TOTAL	OR TOT	AL 790			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)		OTHER THAN SMALL ENTITY OR SMALL ENTITY					
CLAIMS SAVARIAN	HIGHEST NUMBER PRESENT PREVIOUSLY EXTRA	RATE TIONAL	RA	ADDI-			
REMAINING AFTER AMENDMENT Total Minus Independent Minus	PAID FOR	x\$ 9= \(\)	OR X\$1	FEE			
Independent • / Minus	••• 4 =	X40=		<u>_</u> /-			
FIRST PRESENTATION OF MULTIPLE DEP	ENDENT CLAIM	A40=					
+135= OR +270=							
		TOTAL ADDIT. FEE	OR ADDIT	OTAL			
(Column 1)	(Column 2) (Column 3)						
M REMAINING	NUMBER PRESENT PREVIOUSLY PAID FOR	RATE TIONAL FEE	RA	ADDI- TE TIONAL FEE			
AFTER AMENDMENT Total		X\$ 9=	OR X\$1	18=			
Independent • Minus	FAIDENT OF ANY	X40=	OR X8	0=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270=							
·		ADDIT. FEE	OR ADDIT	. FEE			
(Column 1) (Column 2) (Column 3)							
CLAIMS REMAINING AFTER AMENDMENT Total Independent Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	RATE TIONAL	RA				
AMENDMENT Minus	PAID FOR	X\$ 9=	25 Y8	FEE //			
Independent • Minus	*** =		· ·				
FIRST PRESENTATION OF MULTIPLE DEP	ENDENT CLAIM	X40=	OR X8				
+135= OR +270=				′0=			
" If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.							

Application or Docket Number